

#7

OFFICE OF THE MAYOR



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CITY HALL
P.O. BOX 5757
NORTH LITTLE ROCK, ARKANSAS 72119-5757
website: www.nlr.ar.gov

MEMORANDUM

TO: Members of the North Little Rock City Council
FROM: Glinda Craigmyle *GC*
DATE: June 6, 2016
SUBJECT: Alcoholic Beverages Permit Request

For your information, I have enclosed a copy of the *Assignment and Comments of Officials* form from the State of Arkansas, Alcoholic Beverage Control Division.

The following applicant has applied for a restaurant mixed drink permit replacement from Gillmore Russell:

Aziz Pabani
Millennium Bowling Center
7200 Counts Massie Rd.
North Little Rock, AR

Please note the 15 day comment period referred to in the final paragraph of the *Comment* page.

Thank you.

Attachments

FILED 8:45 A.M. _____ P.M.
BY Glinda-Mayors Office
DATE 6-7-16
Diane Whitney, City Clerk and Collector
North Little Rock, Arkansas
RECEIVED by Slattery

ASSIGNMENT

D6J003-D6LQ13



Date Received: 05/23/2016

Date Assigned: 06/01/2016

Applicant: AZIZ PABANI

D.O.B: 10/29/1984

Green Card Number (Permanent Resident Alien):

Home Address: 7 Marans Drive, Little Rock, AR, 72223

Home Phone:

Business Phone :

Cell Phone: 347-993-4507

Trade Name: MILLENNIUM BOWLING CENTER

Former Trade Name: MILLENNIUM BOWL

Business Address : 7200 Count Massie Rd., North Little Rock **County** Pulaski

Type Of Investigation: Restaurant Mixed Drink - Replacement from Gillmore Russell
02268

Dancing, if requested:

Comments / Remarks :

**Copies Of Assignment and
Comment Form Mailed to:**

Mayor Joe Smith & City Council

Michael Davis, Chief of Police

Doc Holladay, Sheriff

Larry Jegley, Prosecuting Attorney

Assigned to Investigator: _____

Stockholders / Partners / LLC

Members:

10/25/10
10/25/10
10/25/10
10/25/10
10/25/10



STATE OF ARKANSAS
ALCOHOLIC BEVERAGE CONTROL DIVISION

APPLICATION FOR PERMIT TO SELL ALCOHOLIC BEVERAGES FOR
CONSUMPTION ON THE PREMISES

Check One: () Hotel-Motel
(X) Restaurant Only

New Application _____
Replacement ✓
Permit No. _____

I, or we, do hereby make application to the State of Arkansas for a permit to sell alcoholic beverages for consumption on the premises, and do hereby submit answers to the following questions under oath for your approval.

MILLENNIUM BOWL OF LITTLE ROCK, LLC FEIN# 81-2353309
Corporate/Partnership/LLC Name
NAME AZIZ PABANI
First Middle Last
HOME ADDRESS 7 MARANS DR LITTLE ROCK, AR-72223 POLASKI
Street City Zip County
BUSINESS NAME MILLENNIUM BOWLING CENTER FORMER NAME MILLENNIUM BOW
BUSINESS ADDRESS 7200 COUNT MASSIE RD. NORTH LITTLE ROCK, AR 72113 POLASKI
Street City Zip County
Is proposed location inside or outside city limits? INSIDE
Are the beverages to be sold in connection with any other business? YES If so, state type of business
BOWLING & GAMING & FOOD
Are you the owner of the proposed premises? YES If leased, give name and address of owner
Does anyone now hold a permit at this location? YES If so, give name, type and permit number(s) of same
GILLMORE RUSSELL, 02268-80064016
Do you or any other person interested in this permit hold any other type of alcoholic beverage permit? NO
If so, give name, place and permit number(s)
Number of sleeping rooms in hotel - NA - Seating capacity of restaurant 50+
(NOTE: Seating capacity should also include any lounge or outside seating areas)
(CHECK MEALS SERVED: Breakfast _____ Lunch _____ Dinner _____ Number of days open per week 7
Has there ever been a beer, wine or liquor permit revoked at this location? NO If so, give name and date
revoked _____

2016 MAY 2 4:11 PM
RECEIVED
MAY 2 4:11 PM
2016



DESCRIPTION OF BUSINESS AND ENTERTAINMENT ACTIVITIES

For all ON PREMISES permits - except private clubs

NAME OF OUTLET MILLENNIUM BOWLING CENTERCITY NORTH LITTLE ROCK COUNTY POLASKI

Under the Section 1.34 of the ABC Regulations, any permit issued by this agency is valid only for the uses described in the original application. Any material change in the outlet's operations or entertainment other than originally listed in this application, *without prior approval of the Director*, shall be grounds for revocation of the permit or other administrative penalties.

Describe the types of business and entertainment activities (cafe / restaurant, pool hall, dancing, etc.) to occur on your permitted premises on the lines below. Use the back of this form if necessary.

If live entertainment is proposed, you must be much specified as to the type and description of that entertainment, i.e., live bands, dancers, etc.

BOWLING ALLEYPOOLRESTAURANTLIVE BANDSARCADE GAMES

ALCOHOLIC BEVERAGE CONTROL DIVISION
COMMENTS OF PUBLIC OFFICIALS

06J003 06L012

APPLICANT'S NAME: AZIZ PABANI

TYPE OF APPLICATION: Restaurant Mixed Drink - Replacement from Gillmore Russell

BUSINESS NAME: MILLENNIUM BOWLING CENTER

BUSINESS ADDRESS: 7200 Count Massie Rd., North Little Rock, AR, 72113

DATE OF APPLICATION: 05/23/2016

NAME OF PUBLIC OFFICIAL: _____

TITLE OF OFFICIAL: _____

OFFICIAL MAILING ADDRESS: _____

PHONE : _____

SIGNATURE OF OFFICIAL: _____ DATE: _____

NAME OF AGENCY OR COURT: _____

Do you have any objections to the issuance of this permit? _____
(Yes or No)

If yes, please explain your objections below:

To ensure your comments are available at the time this application is considered by the Director, please complete and return this form to ABC Administration, 1515 West 7th Street, Suite 503, Little Rock, AR 72201, within fifteen (15) days of receipt. In compliance with the Freedom of Information Act, this Comment Form will become a matter of public record. **Pursuant to ACA 3-2-103, a national fingerprint based background check will be, or has been, conducted. At ACICs request, do not run your own criminal history check through ACIC.**